DOCUMENT RESUME

ED 192 229 CG 014 685

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TITLE Measuring and Predicting the Effectiveness of Helping Responses: Correlates of Client and Counselor Perceptions.
PUB DATE Jun 80
NOTE 38p.; Paper presented at the Annual Meeting of the Society for Psychotherapy Research (11th, Pacific Grove, CA, June 17-20, 1980).

EDRS PRICE MF01/PC02 Plus Postage.
DESCRIPTORS Behavior Patterns; *Counseling Effectiveness; Counseling Techniques; *Counselor Client Relationship; Counselors; *Interaction; Patients; *Perception; *Predictor Variables; *Responses; Therapeutic Environment
IDENTIFIERS *Interpersonal Process Recall

ABSTRACT

Few, if any, studies exist in which the helpfulness of particular responses in context have been evaluated by the involved clients or counselors due to the lack of an adequate method for obtaining evaluations of the impact of individual counselor responses. The development of Interpersonal Process Recall (IPR) provides a research tool which allows clients and counselors to describe the intentions, perceptions, impacts, and other experiences associated with specific interaction events. IPR was used in two studies to provide a measure of therapeutic effectiveness and to find predictors of response effectiveness. Clients rated two measures of response effectiveness as well as each counselor response on four measures of effectiveness. The client-counselor pair in which a response occurred was the best predictor of response effectiveness, with the perception of the person rating response effectiveness as the second best predictor. Generally, clients felt most benefited by nonquestioning or reassuring responses, while counselors felt most effective when reflecting or responding with the intent of guiding or explaining. (Author)

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Measuring and Predicting the Effectiveness of Helping Responses: Correlates of Client and Counselor Perceptions

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ED192229

This is part of a series of reports on the "Psychotherapy Recall Project." Others are Elliott (1979b) and Pistrang, Barker and Elliott (Note 1). The research reported here was supported by grants from the UCLA Graduate Division and the University of Toledo Graduate School. In addition to the clients and counselors who took part, we wish to thank Jerry Goodman and George Saslow for their consultation and support; Barbara Schochet, Karen Bierman and Les Bothast for their technical assistance; and our team of raters: Debra Borys, Robin Cohen, Kathy Crater, Terry Eatkin, Larry Feinstein, Mercedes Galante, Carol Heukrodt, Zan Overturf, Susan Patton, Laura Read, and Louise Silverfarb.

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Paper presented at meeting of Society for Psychotherapy Research, Pacific Grove, California, June, 1980.

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Running head: Response Effectiveness

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Abstract

This research had two goals: The first was to use the method of tape-assisted recall (Interpersonal Process Recall) to provide a new measure of the therapeutic effectiveness of particular counselor responses. The second goal was to find predictors of response effectiveness. Two studies were conducted: In the first, a quasi-counseling study, clients rated two measures of response effectiveness; in the second, actual counseling, study clients and counselors rated each counselor response on four measures of effectiveness. The client-counselor pair in which a response occurred was the best predictor of response effectiveness, accounting for as much as 44% of the variance. The next best predictor was the perception of the person rating response effectiveness. In general, clients felt most benefited by non-questions or by responses which they perceived as reassuring, while counselors felt they were most effective when they reflected or responded with the intention of guiding or explaining the client. The studies demonstrate the value of phenomenological methods in therapy process research.

Measuring and Predicting the Effectiveness of Helping Responses: Correlates of Client and Counselor Perceptions

What properties of helping responses help or hinder clients? Many writers have speculated, theorized, anecdotally reported, or definitively propounded on this topic. For example, basic helping skills training programs (e.g., Danish & Hauer, 1973; Goodman, Note 2; Ivey & Gluckstern, 1974; Kagan, Note 3) teach novice psychological helpers to reduce advice-giving and question-asking and to increase reflection, "uh-huh," or self-disclosure responses. These recommendations usually claim to derive from counseling or psychotherapy theory and practice. However, they are often based on inadequately tested or overgeneralized assumptions about what kinds of helper behaviors will help or hinder clients.

A striking example of over-generalization is that of the so-called facilitative conditions of warmth, empathy and genuineness. The importance of these was initially accepted uncritically (Traux & Carkhuff, 1967). However, a backlash has set in, and the criticisms of these constructs and their usual measurement methods are now too numerous to enumerate here (e.g., Gurman, 1977; Lambert, DeJulio & Stein, 1978; Parloff, Waskow & Wolfe, 1978; but see also Mitchell, Bozarth & Krauft, 1977).

Assumptions about facilitative behaviors and other classes of helper behaviors have been examined in the empirical literature. Numerous criteria for determining the helpfulness of a type of helper behavior have been employed, including the following:

(1) Described by experts as being helpful or hindering (e.g., Matarazzo et al., 1966);

(2) Described by clients or potential clients as either preferred or disliked (e.g., Pohlman & Robinson, 1960);

(3) Shown in naturalistic or experimental studies to be associated with the outcome of counseling or therapy (e.g., Sloane et al., 1975);

(4) Described after the end of therapy by clients or counselors as significantly helping or hindering (Strupp, Wallach & Wogan, 1964);

(5) Shown in naturalistic or experimental studies to be associated with the outcome of particular sessions (e.g., Lennard & Bernstein, 1960);

(6) Shown in naturalistic or experimental studies to be associated with the rates of desireable or undesireable client behaviors within sessions (e.g., Hill, 1974);

(7) Shown to produce immediate positive or negative impacts on what the client does next (e.g., Snyder, 1945).

However, there is a striking omission from this list. There appear to be no studies in which the helpfulness of particular responses in context has been evaluated by the involved clients or counselors. The major reason for this omission has probably been the lack of an adequate method for obtaining client and counselor evaluations of the impact of individual counselor responses. This lack has traditionally restricted clients and counselors to global judgments of helping sessions and relationships, an approach which has been strongly criticized by Fiske (1977) and which may be partly responsible for the generally inconclusive and unhelpful state of the literature.

Tape-assisted recall, developed by Kagan (Note 3) provides a research tool which allows clients and counselors to describe the intentions, perceptions, impacts and other experiences associated with specific events in an interaction. The procedure, referred to as Interpersonal Process Recall (IPR), involves playing back a recording of a just-completed conversation

in order to stimulate the participants' memories. The method makes it possible to compare client and counselor experiences of particular counselor responses to one another or to third party observer ratings. For example, Elliott (1979b), in an analysis drawing from the same data base used in the present report, found a general lack of correspondence between client and third party perceptions of the nature of counselor behaviors. The present report describes two studies in which effectiveness of particular counselor responses was rated by one or both participants in a psychological helping situation. The first study, using a quasi-counseling interview, obtained client perceptions of two types of response effectiveness and perceived counselor intention. The second study, using actual counseling, obtained ratings of four types of response effectiveness and descriptions of helper intentions from both counselor and client. The two studies complement each other in terms of ecological validity, sample size, experimental control and design, and measures obtained.

The objective of these two studies was to identify some of the correlates of response effectiveness - that is, to identify variables which might be useful predictors of response effectiveness. Since the central focus of the investigation was to examine the helpfulness of different types of response, the first three classes of predictors define the nature of helping activity from three different points of view: (a) Objective ratings of six basic types of helping behavior--advisement, acknowledgement ("uh-huh"), reflection, interpretation, question, and self-disclosure (Goodman & Dooley, 1976). Although these variables are certainly not definitive, they were chosen because of their frequent appearance in the counseling and psychotherapy literature (e.g., Danish & Hauer, 1973; Goodman,

Note 2; Hill, 1978; Ivey & Gluckstern, 1976; Sloane et al., 1975). (b) Client perceptions of counselor response-level intentions and (c) counselor reports of their own intentions (counseling study only), each content-analyzed into a set of categories--guiding, reassuring, communicating understanding of client's message, explaining client, gathering information, and using self to help. The parallelism between helping behaviors and intentions was described by Goodman & Dooley (1976) and has been examined by Elliott (1979b).

Two sets of contextual variables were also examined for their contribution to response effectiveness: (d) phase of the interview from which the data were drawn--beginning, middle and end; and (e) counselor-client pair from which data were derived.

Quasi-Counseling Study

Method

Participants. The quasi-counseling study made use of 28 pairs of counselors and clients. There were 15 counselors: 12 internship-level graduate students and 3 faculty members, all in clinical psychology. The predominant theoretical influences reported by helpers were Rogers and Freud. All but 4 counselors saw 2 clients each. The "clients" were 28 undergraduate volunteers from the psychology department subject pool. They constituted a predominately subclinical population (most were evaluated by the counselors and researchers as generally well-functioning); nevertheless, most appeared to want help with an actual personal problem and a number were referred to campus counseling facilities. (For a more complete description of study sample, see Elliott, 1979a.)

Interview. Clients were instructed to discuss a personal concern with

their helper for 30 minutes. Counselors were instructed to do whatever they thought would be helpful, given the time limitation. A stratified sampling approach was used. Three samples, each consisting of 4 or 5 counselor responses, were videotaped through a one-way mirror at the beginning, middle (at 15 minutes) and end (at 25 minutes) of the helping interview.

Tape-Assisted Recall. The recall procedure was adapted from Kagan's (Note 2) "Interpersonal Process Recall" technique, which uses recordings to assist participants in recalling their moment-to-moment experiences and perceptions in an interpersonal interaction. The recall procedure was conducted by the authors.

Recall was standardized by pretraining of "Recall Consultants," by stopping the tape after every counselor response and by the use of a predetermined set of probes. After the quasi-counseling interview, the Recall Consultant described the tape-assisted recall procedure to the client. Then, the videotape was played back for the client, response-by-response, with many stops and replays. The basic response unit was the counselor speaking turn, but clients were allowed to divide turns into smaller units if they wished.

Response Effectiveness Measures. Client perceptions of response effectiveness and counselor intentions were obtained for each counselor response. Clients rated response effectiveness on two 6-point Likert scales ranging from "1" ("not at all") to "6" ("extremely"): (a) Helpfulness ("When your helper said that, to what extent did it help you?"); (b) Empathy ("To what extent did you feel understood by what your helper said just then?"). Client perceptions of counselor intentions were

obtained in the form of free-response answers to the question "What do you think the helper was trying to do in saying that?"

Counselor Response Measures. In this study, the nature of the counselor's response was measured from third party observer and client perspectives. First, third party observers (3 trained raters) rated each response on a set of 6 helping behavior dimensions derived from the framework proposed by Goodman & Dooley (1976; Elliott, Rapkin & Goodman, Note 4): advisement, acknowledgement ("uh-huh"), reflection, interpretation, question, and self-disclosure. Second, clients' free-response descriptions of how they saw their counselors' intentions in performing the same response were transcribed and rated on a set of 6 perceived intention dimensions by a different set of 4 trained raters. These paralleled the helping behavior dimensions: guiding, reassuring, communicating understanding of client's message, explaining client, gathering information and using self to help (Elliott, Note 5). In both cases, statistical analyses used ratings which had been pooled (averaged) in order to increase reliability. (For more complete descriptions of variables, see Elliott, 1979b).

Results

Reliability and Prevalence data for the counselor response measures are included in Table 1. Interrater reliabilities for the pooled ratings were estimated by calculating Pearson correlations between raters and then using the Spearman-Brown formula (this is equivalent to a standardized item alpha coefficient; Cronbach, 1970). The average estimated reliability for the helping behavior dimensions was .85; for perceived intentions, it was .90. The helping activity variables differed in prevalence (an index combining frequency and degree of confidence reflected in rating these

variables): The most prevalent helping behaviors were reflection and question (.32 each); guiding and gathering information were the most commonly perceived intentions (.36 each). The average correlation between the two effectiveness measures, helpfulness and empathy, was .49 ($p < .01$), giving the combined effectiveness ratings an estimated reliability of .66 (standardized item alpha). It was decided to analyze the data using the more reliable combined ratings in addition to the uncombined ratings.

Predictors of Client-Rated Response Effectiveness. In this study, it was possible to test 5 types of predictors of response effectiveness. The first two dealt with the nature of the helping response; the other three examined contextual determinants (i.e., phase of interview, client-counselor pair, and counselor) (see Table 1):

Insert Table 1 about here

Helping Behaviors provided only weak prediction of client ratings of response effectiveness. Because of the problem of non-independence of observations, statistical association was measured by the method of "pooled" or averaged correlations. Correlations between the response-level effectiveness variables and the 6 helper behavior dimensions were calculated over the 12-18 responses sampled from each client-counselor pair, and these correlations were averaged across the 28 pairs. These average, or pooled, correlations were then tested against a null hypothesis of no relation ($\bar{r} = 0$), with statistical significance calculated by t-test. (In other words, the individual pair correlations were treated as descriptive indices of association. The correlations themselves were not tested--instead the average r's were.) Next, the pooled correlations were used in a multiple

regression analysis to assess the power of the whole set of predictor variables. Finally, the statistical significance of the multiple correlation values was estimated by F-test, with degrees of freedom based on the total number of responses from all pairs (n = 504). (This approach is justified because 3-lag autocorrelation analyses found trivial or nonexistent carryover in effectiveness ratings of sequential responses; however, unmeasured forms of statistical nonindependence may have made the true value for degrees of freedom somewhat lower than that used.) The set of helping behaviors accounted for 4% and 6% of the variance in overall effectiveness and empathy, respectively ($F(6,480) = 3.22, 5.39$, $p < .01$). For both variables, reflection was a significant positive predictor, while question predicted negatively. However, the correlations were rather small. In addition, helping behaviors did not predict helpfulness ratings ($R^2 = .01$).

Perceived Intentions described by clients were somewhat better predictors of response effectiveness than were objectively rated behaviors, providing medium-sized effects for ratings of empathy (10% variance accounted for) and overall effectiveness (11%), and a somewhat smaller effect for helpfulness (7%). Pooled correlation analyses indicated that the strongest, most consistent predictor of all three effectiveness variables was gathering information (a negative correlation). In addition, reassuring and explaining client were significant positive predictors for response helpfulness, empathy and overall effectiveness, while communicating understanding and using self to help predicted empathy and overall effectiveness, but not helpfulness. It should be noted that these first two sets of predictors are not completely orthogonal to or independent from each other. Elliott (1979b) found relationships among them, particularly between

question and gathering information. Therefore, they may to a certain extent be accounting for the same variance in the effectiveness ratings, although the overlap is probably not large.

The strength of the three contextual predictors of effectiveness--phase, pair and counselor--was calculated by the use of several one-way ANOVAs, from which effect size measures were calculated (ω^2). To test the effects of phase of interview, beginning, middle and end samples were treated as three "treatment levels." Phase did not predict response helpfulness (all ω^2 values were .00). (b) The effect of client-counselor pair was similarly tested by treating each of the 28 pairs as a treatment level. Client-counselor pair turned out to be the strongest predictor of response effectiveness, accounting for 19% of the variance in helpfulness and overall effectiveness. (c) Since most counselors saw two clients, it was possible in part to analyze the client-counselor pair variance by measuring the variance attributable to counselors in a 13-level one-way ANOVA (the 3 faculty members who saw one client each were conservatively lumped together). By this analysis, 8-9% of the variance in response effectiveness was accounted for by counselors, leaving 10-12% attributable to clients and client-counselor interactions (which could not be teased apart).

Counseling Study

In order to determine the generality of the results of the initial study and to test a larger set of predictors, a second study was carried out. This study used counselors and clients in actual psychotherapy. The procedures were similar, but not identical, to those used in the quasi-counseling study. The major differences were that both counselors and clients provided data on response effectiveness and the nature of the helping

activity (in addition to the data from objective raters), and the tape-assisted recall used audio instead of video recordings. In addition, there were also differences in degree of sex matching (81% in the counseling study vs. 50% in the previous study) and helper orientation (fewer counselors reported a client-centered orientation).

Participants. Sixteen pairs of clients and counselors were recruited from a variety of outpatient settings. There were 7 female and 9 male counselors and clients. In all but 3 cases, clients saw counselors of the same sex. No counselor was represented more than once in the study. The counseling can be generally characterized as eclectic, psychodynamically-oriented. Only clients between the ages of 18 and 45 and without psychotic, organic or sociopathic diagnoses were included. Half of the counselors were relatively inexperienced psychology interns or psychiatry residents (1-5 years experience; mean age 29 years), while the other half were experienced, practicing clinical psychologists, psychiatrists, and a clinical social worker (6-35 years experience; mean age 45 years). Half of the client-counselor pairs from each of these two experience-level groups were sampled after a brief contact (5-12 sessions), while the other half were sampled after extended contact (20-130 sessions). Finally, while recruitment of volunteers may have been biased towards selection of more successful helping relations, clinical impressions and ratings suggest that the sample contained both "peak" and "poor" hours.

Interview. After counselor and client had both agreed to participate in the study, a session was audio-taped. All sessions took place in their usual settings; participants were instructed to carry on their usual, standard-length interviews. Three 5-10 minute segments were audio-taped

beginning at 5, 25, and 40 minutes into the session.

Tape-Assisted Recall. Recall was based on the first 4 counselor talking turns in each of the three sampled segments. The tape-assisted recall procedure for client and counselor was conducted either simultaneously or with counselor recall shortly after client recall. Parallel forms were used for both client and counselor; both were asked to describe the counselor's intentions and to rate 4 types of response effectiveness. In order to provide respondents with the opportunity to rate responses as either negative or positive in their effect on the client, a symmetrical 7-point scale was adopted, for example, ranging from "greatly hindered me" ("1") to "greatly helped me" ("7"), with a midpoint of ("4") for "neither" or "neutral." The four types of effectiveness rated by clients and counselors were helpfulness (for clients: "When your therapist said that, did it hinder or help you?"), empathy ("When your therapist said that, did you feel misunderstood or understood?"), affective impact ("Did that make you feel worse or better?"), and cognitive impact ("Did what s/he said make you think more or less?"). In addition, an average of all four scales was used as a measure of overall response effectiveness. Finally, for reasons of practicality and confidentiality, it was necessary to switch from video to audio-tape recall. (Piloting suggested that little was lost by this change, at least for the purposes of this research, which examined only verbal communication.)

Classification of Response Measures. Classification of helping behavior and perceived intention dimensions was carried out using the same system as the first study. In addition, counselor reports of their own response-level intentions were transcribed and rated along the same six

dimensions used for client perceptions. Three raters rated helping behaviors. A different set of 4 raters rated client-perceived intentions; finally, 3 of these 4 raters also rated counselor intentions. Client perception and counselor intention data were each presented to raters in scrambled order and with different numbering systems, ensuring blind, independent rating.

Results

Reliability and Prevalence (Table 3). The average estimated reliability for helping behaviors was .89; for perceived intentions, it was 90; and for counselor intentions, it was .89. Question was the most prevalent helping behavior (.34); guiding and gathering information were most commonly perceived by clients (.34 each); while guiding and explaining were most commonly intended by counselors (.42 and .40 respectively). As in the first study, these three sets of predictors were not completely orthogonal, although the amount of overlap was small.

Relations Among Effectiveness Measures (Table 2). Using the pooled correlation method, client-rated helpfulness, empathy and affective impact were all significantly related to one another but not to cognitive impact. The reliability of the combined ratings (standardized item alpha) was an unspectacular .50, with helpfulness correlating most strongly with combined

Insert Table 2 about here

ratings. For counselor ratings, all pooled correlations among effectiveness variables were significant except for the one between affective and cognitive impact; the reliability of the combined ratings was .61, with helpfulness again correlating most highly. Factor analyses of client and

counselor ratings each yielded a general effectiveness factor, most heavily loaded by helpfulness and accounting for 30% of the variance. However, combined ratings were used in the analyses reported here because they produced roughly the same results as the factor scales and because they provide a more convenient summary index. The factor analyses also supported the separate analysis of each type of response effectiveness, since most of the variance was unique to each measure rather than shared in common.

Predictors of Client-Rated Helpfulness (Table 3). Five sets of predictors of client ratings of response-level helpfulness were tested. The first three types of predictors dealt with the nature of the helping response as viewed by third party raters, client and counselor, while the last two involved the contextual variables, phase of session and client-counselor pair.

Insert Table 3 about here

The set of helping behaviors accounted for a significant proportion of the variance in client-rated helpfulness (9%), empathy (7%) and overall effectiveness (8%). Four out of 30 individual correlations were statistically significant: Question was a negative predictor of empathy and overall effectiveness; interpretation-helpfulness provided the largest correlation ($\bar{r}$ = .25); acknowledgement ("uh-huh") predicted empathy ratings. However, these results must be interpreted cautiously because they do not reach the more stringent criterion of significance (preferable because of the large number of significance tests).

Client-perceived intentions accounted for somewhat larger, medium-sized, non-chance proportions of the variance for all clients ratings,

ranging from 10% for helpfulness to 16% for empathy. Eleven out of the 30 individual correlations were significant. When clients saw their counselors as reassuring them, they felt more helped, understood, better and generally benefited. In addition, (a) they felt more helped when they perceived the counselor as explaining; (b) they felt less understood when they perceived guiding and gathering information; (c) they felt worse when they perceived counselor guiding; and (d) they thought less when they perceived communicating understanding and using self.

Counselor descriptions of their own intentions contributed medium-sized effects to client ratings of affective (8%) and cognitive (9%) impact. Clients felt less understood when counselors tried to gather information; they also thought less when counselors tried to share self. However, since only these 2 out of 30 individual correlations were statistically significant, one or both of these effects may have been due to chance.

Phase of session produced small but significant effects for empathy (ω^2 = 5%) and overall effectiveness (ω^2 = 2%). Empathy and overall effectiveness ratings declined slightly from beginning to end of the interview (about 1 scale point for overall effectiveness).

Finally, client-counselor pair contributed 44% of the variance for overall effectiveness and helpfulness. The effect sizes for empathy (ω^2 = 26%) and cognitive impact (ω^2 = 30%) were smaller, but still contributed large-sized effects, while the effect size for affective impact was 11% of the variance.

Predictors of counselor-rated effectiveness. The same 5 sets of variables were also used to predict counselor estimates of their own response

effectiveness. The best predictors were client-counselor pair and counselor reports of their own intentions.

As a set, helping behaviors significantly predicted all types of counselor ratings, the largest effect being a medium-sized 13% for cognitive impact. Seven out of 30 individual correlations were significant. Most notably, counselors thought that they reduced cognitive stimulation when they said "uh-huh" and that they made clients feel less good (but think more) when they asked questions. In addition, they believed they had a more positive overall impact when they reflected, that they were more helpful when they advised and self-disclosed, and that they were more understanding when they interpreted.

Client perceptions of counselor intentions were generally poor predictors of counselor estimates of response effectiveness, with the exception of significant, medium-sized effects for affective (9%) and cognitive (12%) impacts. The seven significant individual predictors of these two types of estimated effectiveness appeared to operate in a reciprocal relation: counselors believed that they had stimulated client thought when clients saw them as refraining from reassuring or using self while trying to guide and gather information; while perceived reassuring or using self (but not guiding) predicted affective impact.

Counselor descriptions of their own intentions contributed medium or slightly larger effects to all counselor response effectiveness measures except impact (10 out of 30 individual correlations were significant). Counselors saw themselves as more helpful, cognitively stimulating and effective overall when they intended to guide and explain. They saw themselves as more understanding when they refrained from gathering

information and tried to communicate their understanding, while they believed they were more affectively supportive when they tried to reassure clients.

Phase of interview did not predict estimated response effectiveness, except in the case of estimated helpfulness, where a slight increase in the middle of the interview was responsible for a small effect (ω^2 = 3%).

Finally, client-counselor pair accounted for much less of the variance in counselor ratings than in client ratings of response effectiveness. However, with the exception of empathy, pair still contributed significant medium-sized or somewhat larger effects, with the largest proportion of variance being for helpfulness (15%) and affective impact (18%).

Comparisons of Counseling and Quasi-Counseling Study Results. Clients in each study rated counselor responses for helpfulness and empathic quality. Out of 24 possible comparisons between studies, there were only two significant differences. (These were measured by t-tests between mean correlations for each study.) In the counseling study, interpretation was a better predictor of helpfulness ($\bar{r}$ = .06 vs. .25; t = 2.03; p <.05) and perceived reassurance was a better predictor of empathy ($\bar{r}$ = .14 vs. .34; t = 2.85; p <.01). In general, however, the results of the two studies corresponded closely: When the 24 pairs of comparable pooled correlations (given in Tables 1 and 3) were correlated, they turned out to be strongly related (r = .72; p <.01).

Discussion

The purpose of the research reported here was to identify some of the correlates or predictors of response-level helpfulness. The potential predictors tested consisted of two types: the type of helping activity, as

viewed from the perspectives of client, counselor and third party observer, and the contextual variables, phase of interview and client-counselor pair.

Type of Helping Activity. Among the helping activity variables, the best predictors of client and counselor ratings of response effectiveness were the perceptions by the person doing the rating. Thus, client perceptions of counselor intentions predicted client effectiveness ratings, while counselor reports of their own intentions predicted counselor response effectiveness ratings. For clients, this pattern lends further support to the idea that clients' experiences of therapeutic benefit are mediated through their perceptions of the helping process and relationship (Barrett-Lennard, 1962; Gurman, 1977; Orlinsky & Howard, 1975; Rogers, 1957).

Client Ratings. In both samples, clients found reassuring nonquestioning responses to be the most generally effective for helping them. Consistent with previous literature (Frank & Sweetland, 1962; Hill, 1974; Lennard & Bernstein, 1960), questions were seen as less helpful; however, the most accurate description is that they were seen as neutral rather than actually harmful. Perceived reassuring was the largest and most consistent predictor; in the counseling sample, it was most strongly associated with empathy and affective impact ratings. Although Elliott (1979b) found perceived reassuring to be associated with the helping behavior acknowledgement ("uh-huh"), the results of the present study make clear that most of the positive effects of perceived reassuring is not due to the counselor saying "Uh-huh." Current research is examining the role of a broader set of helping behaviors which may communicate the intention to reassure.

In addition, it should be noted that where the variables overlapped, the results of the two studies were quite comparable. There were several

discrepancies (interpretation better predicted client-rated helpfulness, perceived reassurance better predicted client-rated empathy in the counseling study). However, the studies differ in a number of ways (length of relation, counselor orientation, sex matching), making interpretation problematic at present.

Counselor Ratings. In general, counselors believed they were most effective when they were reflecting what the client said or when they saw themselves as guiding or explaining the client. This pattern was associated with cognitive impact, suggesting that counselors may see themselves as most effective when they believe they are cognitively stimulating the client with a "deep" reflection (cf. Speisman, 1959) which guides the client to look more clearly at self and to begin to understand personal events and patterns.

These differences in what clients and counselors find helpful provide an additional demonstration of the value of phenomenological reports in counseling process research. The differences in correlates of response effectiveness may reveal differences in client and counselor phenomenologies, with clients more concerned with emotional support (empathy-affective impact produced by reassurance without use of question form) and counselors more oriented toward the task of helping the client to explore and understand him/herself better (reflect-guide-explain-cognitive impact).

Nevertheless, most of the relations between helping activity variables and response effectiveness ratings were small-to-moderate in size. They are not nearly large enough to provide for adequate, practical prediction of impact reported by clients or observed by counselors. However, the disappointing size of the correlations is probably not due to unreliability of

measurement, because the more reliable combined ratings did not produce larger correlations. In fact, it appears that some relations may have been cancelled out by combining ratings, particularly with counselor ratings, where affective and cognitive impact seemed to work in opposition to one another. This pattern, along with the results of the factor analyses, suggests that response quality is multi-dimensional and that it may be useful to examine the different variables separately, as well as in combination.

Client-Counselor Pair. Turning to the contextual variables, the single largest contributor to response effectiveness ratings was generally the client-counselor pair in which the response occurred. In other words, clients and counselors both demonstrated a tendency to set varying baseline or mean levels of response effectiveness or impact. In this report, client-counselor pair was considered as a "treatment level," without reference to what the actual individual differences between pairs might have been. Consequently, variance due to client-counselor pair is presently subject to several different interpretations: To begin with, client-counselor pair variance may only reflect varying response biases (for example, one effusive, hysteric client rated all of her male counselor's responses as "extremely helpful"). Alternatively, client-counselor pair variance may be due to global differences in the perceived quality of the helping relationship or alliance, differences which may strongly color client perceptions of particular responses. Most likely, client-counselor pair variance may reflect a combination of response bias and relationship influences. However, the two interpretations may simply be two different ways of saying the same thing: One would expect the presence of a good or bad helping relationship or alliance to "bias" client or counselor

perceptions and ratings of response effectiveness. The question then becomes whether the response bias occurs during the therapy session and is accurately recalled later or whether it reflects an invalidity in the recall and rating process. The issue of evaluating the validity of data obtained by tape-assisted recall is a thorny one, too complex to address here (but see Elliott, Note 6).

Regardless of the meaning of the client-counselor pair variance, it is important to note that this variance is (a) greater for clients than for counselors, (b) greater for clients in continuing counseling relationships than in initial quasi-counseling interviews; and (c) greatest for helpfulness and combined effectiveness ratings (for clients in actual counseling). This pattern of results is thus at least consistent with the notion of a helping alliance, characterized by an expectancy for help, which becomes more potent (for better or for worse) for clients as counseling or therapy progresses (cf. Luborsky, 1976; Horowitz, 1979).

Phase of Session. Gurman (1973) found that counselor facilitative conditions (as rated by objective raters) differed according to which phase of the session was sampled. However, the three phase effects found here in the counseling study were small and did not match those reported by Gurman. From the analyses, it is clear that counselors acted differently during beginning, middle and ending phases of the interview (cf. Beers & Foreman, 1976; Hill, 1978). Nevertheless, for the most part, client and counselor ratings appeared to be "calibrated" to the tasks of each particular phase of the session, with the result that they did not vary substantially across phases.

Methodological Implications. This research demonstrates that response

effectiveness can be studied and illustrates the usefulness of one particular method for measuring it. Recommendations for future research are as follows: First, the tape-assisted recall method (IPR) should be used to identify and examine significantly helpful or hindering responses rather than the stratified sample of responses used here (Elliott et al., Note 7). This would increase the likelihood of contributing knowledge useful to the training and practice of counseling and psychotherapy. Second, the taxonomy of objective helping behaviors used in this research was too general. The simplifying assumption of lumping together different types of question, advisement, etc., is no longer warranted. Objective measures of helpful and hindering therapy process are needed, including: (a) measures of "good" and "bad" questions, advisements, etc.; (b) response-level measures of the facilitative conditions of empathy, warmth and genuineness; (c) measures of counselor or therapist "errors" (Matarazzo et al., 1966); (d) measures of accompanying nonverbal behaviors, especially voice quality (Rice, 1965) and facial expression (Tepper & Haase, 1978); and (e) measures of response-contexts, including such things as topic, timing, and preceding client behavior. Third, it is essential to try to identify sources of meaningful individual difference, both in level of helpfulness and in what sorts of behavior will predict the helpfulness of particular helper responses. Based on the literature, the most promising individual difference variables probably include client personality or cognitive style (e.g., locus of control, Beutler, 1979; Bordin, 1974), social class (Jones, 1974), and client-counselor matching on cognitive or value dimensions (Parloff, Waskow & Wolfe, 1978).

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Table 1

Predictors of Response Effectiveness Ratings by Clients, Quasi-Counseling Study

Variable:	Reliability[a]	Prevalence[b]	Correlations with Client Ratings[c]		
			Helpfulness	Empathy	Both
Helping Behaviors:					
Advise	.78	.11	.04	-.01	.01
Acknowledge	.92	.08	-.04	-.01	-.05
Reflect	.77	.32	.05	.18***	.14*
Interpret	.81	.27	.06	.09	.10
Question	.97	.32	-.07	-.21***	-.15*
Self-disclose	.87	.16	.08	.01	.03
R^2[d]			.01	.06**	.04**
Client Perceptions:					
Guide	.88	.36	.04	-.03	-.01
Reassure	.93	.13	.14*	.14*	.16***
Communicate understanding of message	.90	.23	.09	.20***	.17***
Explain Client	.83	.23	.17***	.13*	.19***
Gather information	.94	.36	-.17***	-.24***	-.23***
Use self to help	.89	.22	.01	.14***	.09*
R^2			.07**	.10**	.11**
Phase of interview (ω^2)			.00	.00	.00

Variable:	Reliability[a]	Prevalence[b]	Correlations with Client Ratings[c] Helpfulness	Empathy	Both
Client-Counselor Pair ($\underline{\omega}^2$)			.19**	.17**	.19**
Counselor ($\underline{\omega}^2$)			.08**	.08**	.09**
Clients plus interaction[e] ($\underline{\omega}^2$)			.12**	.10**	.11**

*$\underline{p}$ <.05 (unprotected test)

**$\underline{p}$ <.01 (protected test for $\underline{R}^2$ and $\underline{\omega}^2$; experimentwise error = .25)

***$\underline{p}$ <.005 (protected test for $\overline{\underline{r}}$; experimentwise error = .25)

[a] Standardized item alpha, pooled ratings.

[b] Because of multiple classification, the total proportions for each set of helping activity predictors exceed 1.00.

[c] Pooled correlations ($\overline{\underline{r}}$), $\underline{n}$ = 18-28 client-counselor pairs, depending upon number of pairs for which $\underline{r}$ could be calculated.

[d] Based on pooled correlations; Shrunken $\tilde{\underline{R}}^2$ values were .01 smaller than those reported.

[e] Difference between $\underline{\omega}^2$ values for pairs and counselors; discrepancies due to rounding.

Table 2

Relations Among Effectiveness Variables, Counseling Study

Client Ratings

	Helpfulness	Empathy	Affective Impact	Cognitive Impact	Combined Ratings
Helpfulness	-	.33**	.45**	.21	.72**
Empathy		-	.24**	.01	.67**
Affective Impact			-	-.07	.70**
Cognitive Impact				-	.32**

Counselor Ratings

	Helpfulness	Empathy	Affective Impact	Cognitive Impact	Combined Ratings
Helpfulness	-	.46**	.29**	.41**	.79**
Empathy		-	.19**	.27*	.73**
Affective Impact			-	.09	.57**
Cognitive Impact				-	.56**

*$p < .05$ (unprotected test)

**$p < .01$ (protected test, experimentwise error = .25)

Note. Pooled correlations ($\bar{r}$), $n = 11 = 16$ client-counselor pairs, depending upon number of pairs for which r could be calculated.

Table 3

Predictors of Response Effectiveness, Counseling Study

Variable:	Reliability[a]	Prevalence[b]	Correlations With Client Ratings[c]					Correlations With Counselor Ratings[c]				
			HELP	EMP	AFF	COG	ALL	HELP	EMP	AFF	COG	ALL
Helper Behaviors:												
Advise	.86	.15	.11	-.01	.12	.07	.13	.20*	.06	.07	.04	.13
Acknowledge	.95	.11	-.16	.16*	.12	-.21	.06	-.14	.00	.15	-.35***	-.07
Reflect	.78	.29	.04	.04	-.14	.05	-.06	.11	.15	-.01	.08	.14*
Interpret	.85	.28	.25*	.10	-.02	.15	.17	.11	.18*	-.05	.10	.14
Question	.97	.34	-.10	-.19*	-.11	.08	-.15*	-.04	-.12	-.28*	.17*	-.13
Self-disclose	.95	.21	.12	.00	.07	.06	.12	.17*	.08	.08	.10	.15
R^2[d]			.09*	.07*	.05	.06	.08*	.08*	.07*	.10**	.13**	.07*
Client Perceptions:												
Guide	.86	.34	-.05	-.20*	-.19*	.17	-.17	.01	-.05	-.11	.21*	-.00
Reassure	.96	.16	.23*	.34***	.29*	-.19	.30***	-.07	.02	.23*	-.25*	-.00
Communicate	.89	.16	.09	.12	.15	-.24*	.10	-.01	.12	.14	-.18	.06
Explain	.84	.31	.15*	.02	-.09	.18*	.10	-.02	.09	-.02	.08	.06
Gather	.93	.34	-.14	-.23*	-.08	.04	-.17	.01	-.11	-.17*	.16*	-.06

Table 3 (continued)

Variable:	Reliability[a]	Prevalence[b]	Correlations With Client Ratings[c] HELP	EMP	AFF	COG	ALL	Correlations With Counselor Ratings[c] HELP	EMP	AFF	COG	ALL
Use self	.90	.14	.02	.10	.18	-.22*	.10	.02	.11	.23*	-.23*	.12
R^2			.10**	.16**	.11**	.12**	.14**	.01	.04	.09*	.12**	.03
Counselor Intentions:												
Guide	.88	.42	.16	-.03	.10	.09	.09	.19*	.07	-.04	.23*	.15*
Reassure	.89	.19	.00	.08	.14	-.05	.08	.05	.01	.23*	-.17*	.04
Communicate	.85	.21	-.05	.08	-.16	-.02	-.06	.02	.18*	.05	.05	.12
Explain	.88	.40	.12	-.02	-.14	.16	.02	.17*	.18	-.08	.34***	.21*
Gather	.95	.31	-.02	-.23*	.07	.13	-.06	-.17	-.29*	-.01	.09	-.17
Use self	.90	.23	-.04	.02	.07	-.20*	-.01	-.01	.07	.12	-.14	.03
R^2			.03	.05	.08*	.09*	.02	.08*	.13**	.06	.17**	.09*
Phase (ω^2)			.00	.05**	.01	.01	.02*	.03*	.00	.00	.02	.01
Pair (ω^2)			.44**	.26**	.11**	.30**	.44**	.15**	.04	.18**	.07*	.12**

*$p < .05$ (unprotected test)

**$p < .005$ (protected test for R^2 and ω^2; experimentwise error = .25)

***$p < .001$ (protected test for r; experimentwise error = .25)

Note. Abbreviations: HELP=Helpfulness; EMP=Empathy; AFF=Affective impact; COG=Cognitive impact; ALL=Combined effectiveness ratings.

Table 3 (continued)

[a]Standardized item alpha, pooled ratings.

[b]Multiple classification results in total proportions for each set exceeding 1.00.

[c]Pooled correlations ($\bar{r}$), n = 11-16 client-counselor pairs, depending upon number of pairs for which r could be calculated.

[d]Based on pooled correlations; Shrunken $\tilde{R}^2$ values were .03 smaller than those reported.